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 Suite 2800 1100 Peachtree St.
 Atlanta GA 30309-4530
 1 404 815 6500 f 404 815 6555
 www.KilpatrickStockton.com

 direct dial 404 815 6291
 direct fax 404 541 3467

MBertelson@KilpatrickStockton.com

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COMMENTS

Please acknowledge receipt of the enclosed:

- 1) Transmittal Form (PTO/SB/21)
- 2) Amendment and Response to Final Office Action (7 pgs.)

Applicant(s): Derek Metcalf
Application No.: 10/643,362
Filing Date: August 19, 2003
Title: Adjustable Shelving System

Attorney Docket No. 38949/282196.....Atty: MAB/sdh

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TRANSMITTAL
FORM

Application Number

10/643,352

Filing Date

August 19, 2003

First Named Inventor

Derek METCALF

Art Unit

3634

Examiner Name

Jennifer Eleanore Novosad

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

8

Attorney Docket Number

38949/282196

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ENCLOSURES (check all that apply)

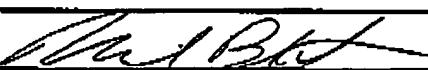
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Fax transmission sheet
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
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<input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53		
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

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Kilpatrick Stockton LLP

Signature



Printed Name

Michael A. Bertelson

Date

October 3, 2006

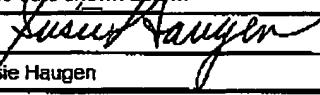
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Susie Haugen

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October 3, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Derek Metcalf

SERIAL NO.: 10/643,352

G.A.U: 3634

FILED: August 19, 2003

EXAMINER: Jennifer Eleanore Novosad

FOR: Adjustable Shelving System

ATTORNEY DOCKET: 38949/282196

DATE: October 3, 2006

Commissioner for Patents
P.O. Box 1450
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Susie Haugen

AMENDMENT AND RESPONSE TO FINAL OFFICE ACTION

Sir:

In response to the final Office action of July 3, 2006 (the "Office Action"),
please amend the above-identified application as follows:

- **Amendments to the Claims** are reflected in the listing of claims that begins on page 2 of this paper.
- **Remarks** appear on page 6 of this paper.